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From: Commanding General  
To: Distribution List

Subj: CIVILIAN EMPLOYEE ASSISTANCE PROGRAM (CEAP)

Ref: (a) CPI 792  
(b) FPM Supplement 792-2  
(c) FPM 792

Encl: (1) Definitions  
(2) Guidelines for Disciplinary Actions  
(3) CEAP Referral Notice  
(4) Procedures For Obtaining Competence-For-Duty Examinations For Civilian Employees Suspected Of Being Under The Influence Of Intoxicants  
(5) Competence For Duty Examination

1. Purpose. To publish policy, procedures, and responsibilities relative to subject Program which provides assistance to civilian employees who have personal problems involving the misuse of alcohol or drugs or other personal problems which have an adverse effect on job performance, in accordance with references (a) through (c).

2. Definitions. The terms used in this Order are defined in enclosure (1).

3. Background

a. Current guidelines from the U.S. Office of Personnel Management require that assistance be given to employees who have a problem involving misuse of either alcohol or drugs. However, those activities which established Civilian Employee Alcoholism Programs in accordance with earlier Navy instructions have found that, of the personnel referred for counseling and assistance, a significant number have problems other than those involving misuse of alcohol and drugs. Consequently, reference (c) provides for assistance, not only to employees who have problems with alcohol or drugs but also to employees who have other problems which result in significantly impaired job performance.

b. Effective implementation of the CEAP is a Command responsibility. , Active leadership and direction by department heads and other management officials is dictated, not by law or regulation but by the need for sound management practices. In any activity, the personnel problems which are costly in terms of lost production, accidents, disciplinary actions, and administrative effort are generated by a relatively small proportion of the activity's employees. The CEAP is a means to eliminate (in most cases) the problems generated by such employees and thus improve productivity and reduce overhead costs. However, it will do so effectively only if there is continuing support from all levels of management.

4. Policy. It is the policy of this Command:

- a. To recognize alcoholism and drug abuse as treatable illnesses.
- b. To recognize alcoholism and drug abuse as health problems in which the employee's job performance is impaired as a direct consequence and that employees having these illnesses will receive the same consideration and offer of assistance that is extended to employees having other illnesses or health problems.
- c. To be concerned with the employee's use of alcohol only as it may affect job performance or the efficiency of the service. (However, the Command will not condone employee drug activity or other actions contrary to law. Alcohol or drug abuse will not bar management initiated corrective action, including removal, based on illegal activities or when otherwise warranted.)
- d. That employment or promotion opportunities will not be jeopardized because of prior alcohol or drug abuse or by a request for counseling or referral assistance. The confidential nature of counseling or medical records of individuals who participate in the program will be preserved. .
- e. To grant sick leave or leave without pay for alcohol or drug abuse treatment or rehabilitation as with any other illness or health problem. Sick leave or leave without pay may also be granted to an employee who is participating in family therapy when a member of the employee's immediate family is undergoing treatment for alcoholism, drug abuse, or other health problems when family therapy is an element of the treatment plan. In these cases, the employee must provide medical certification, signed by a licensed physician, which states that family therapy is a part of the treatment plan, and that the employee's presence

is required. Such certification must be provided for each absence of this nature.

f. That employees who may have an alcohol, drug abuse, or other personal problem are encouraged to voluntarily seek counseling and information from designated contact and referral (I&R) counselors.

9. That employee referral to or participation in the CEAP will not be based on any non-job or non-performance related factor, prohibited personnel practice or action that would constitute a finding of overt or presumptive discrimination on the grounds of race, color, sex, age, physical or mental handicap, religion or national origin.

5. General. The Civilian Employee Assistance Program (CEAP) located in Building 3500, Wing 600, phone 439-5276, is designed to provide assistance to civilian employees who have problems involving the misuse of alcohol or drugs or other personal problems which have or may have an adverse effect on job performance or job related conduct. The CEAP makes assistance available through the process of contact and referral counseling. The program also includes an ongoing educational effort intended to assure that all employees are aware of the intents, purposes, and benefits of the CEAP as well as their responsibilities in regard to the program. The CEAP does not place responsibility on the Command for rehabilitation of employees with problems. The Command's responsibilities are to provide assistance to employees in locating appropriate sources of treatment and/or rehabilitation, and to cooperate, to a reasonable degree, with employees who are willing and able to participate in a treatment or rehabilitation program. The responsibility for successful completion of a treatment or rehabilitation program is that of the employee.

6. Relationship To Disciplinary Action. The CEAP supplements but does not replace existing procedures for dealing with problem employees. The purpose of the discipline is to correct the offending employee and maintain discipline and morale among other employees. The purpose of the CEAP is to correct unsatisfactory performance or conduct, hopefully before disciplinary action becomes necessary. Referring an employee to an Information and Referral Counselor is not a bar to taking action under the provisions of the applicable chapters of BO P12000.6. There is a distinction to be made between offering assistance through counseling to an employee with a problem and taking corrective action against an offender. In some instances it will be appropriate to concurrently offer assistance and take corrective action.

7. Responsibilities

a. Director, Personnel and Administrative Division, (Ilead, Personal Affairs Branch), will:

- (1) Assume overall program responsibility for the CEAP.
- (2). Periodically evaluate the CEAP and apprise the Commanding General/Chief of Staff of program status.

b. CEAP Administrator will:

- (1) Be responsible for execution and coordination of all aspects of the CEAP and function as principal point of contact for CEAP matters.
- (2) Assure that required education and training is provided all employees, supervisors, and Information and Referral Counselors.
- (3) Maintain records and prepare required reports.
- (4) Participate as Command representative/liaison in dealings with community groups and agencies which may serve as referral resources .
- (5) Maintain a current directory of community resources to which employees may be referred for assistance.
- (6) Conduct an ongoing program of publicity to ensure command-wide awareness of the CEAP.
- (7) Provide day-to-day advice and assistance to supervisors and managers in regard to their responsibilities within the CEAP.
- (8) Provide counseling, within program limits, to employees with problems.

c. Information and Referral (I&R) Counselors will:

- (1) Conduct confidential consultations with employees who so request, or are referred by supervisors, in an attempt to objectively evaluate and identify personal problems which are affecting job performance or job related conduct. If such evaluation and identification are beyond the capability of the I&R Counselor, the Counselor may refer the employee to the Industrial Medical Officer for evaluation and possible referral.

- (2) Maintain an awareness of community referral resources and recommend additions to or deletions from the directory maintained by the CEAP Administrator.
- (3) Advise supervisors and managers on a day-to-day basis regarding the use of CEAP procedures in dealing with employee problems.
- (4) Consult and coordinate with the CPO Staff and/or EEO Counselors as necessary in individual cases. Such consultation and coordination will be accomplished without violating the confidentiality of the program.
- (5) Conduct necessary post-rehabilitation follow-up.
- (6) Maintain individual case files which will contain data necessary for the counselor's use and for required reports.
- (7) Information and Referral Counselors will not attempt rehabilitation, long-term counseling or any type of therapy.
- (8) Maintain strict confidentiality of counseling records. The content of an I&R counseling interview, specifically including the nature of the employee's problem, is to be kept confidential.

d . Supervisors/Managers will:

- (1) Identify and document instances of unacceptable work performance or conduct and patterns of performance deterioration. Follow guidelines outlined in enclosure (2).
- (2) Determine the appropriate action to correct the unacceptable or deteriorating performance.
- (3) Seek guidance from the activity's CEAP Administrator, an I&R Counselor, the Civilian Personnel Office or all three.
- (4) Discuss unacceptable or deteriorating work performance with the employee, provide the employee with documented instances of such performance, and give the employee a firm choice between seeing and cooperating with an I&R Counselor or receiving other management-initiated corrective action. If an employee agrees to see a counselor, submit a CEAP Referral Notice (see enclosure (3)) to be received by the CEAP Administrator, Personal Affairs Branch, prior to the initial counseling session.

(5) Effect or initiate corrective action if:

(a) The employee declines to see or cooperate with an I&R counselor or

(b) The employee undertakes the course of treatment recommended by the I&R Counselor but fails to improve work performance or behavior to an acceptable level within a reasonable length of time.

(6) Corrective action may be taken concurrently with referral to the I&R Counselor.

(7) Supervisors are not to make determinations as to whether alcoholism or drug abuse is present and a reason for the employee's unacceptable or deteriorating work performance or behavior.

(8) For cases of suspected intoxication on the job the supervisor should:

(a) Summon another supervisor or responsible employee to witness the affected employee's behavior, physical appearance and response to the supervisor's questions and/or instructions. A union representative may be present if requested by the employee.

(b) In the presence of the witness, confiscate any visible intoxicating beverage or drugs the employee may have in his/ her possession, giving him/her a receipt describing the contents, if known, and quantity. The Provost Marshal should be notified immediately by the supervisor or other responsible employee should they have knowledge that another employee or person aboard the Base is in possession of drugs or illegal substances.

(c) Follow the procedures outlined in enclosure (4) for obtaining a competence-for-duty examination.

e. Employees who elect to use the CEAP will:

(1) Participate in the CEAP when they become aware of any personal problem which results or may result in a deterioration of their work performance.

(2) Cooperate with supervisors and I&R Counselors in matters relating to the CEAP.

(3) Correct the unacceptable performance or conduct with or without assistance from the CEAP.

(4) The employee is not required to accept or act on recommendations made by the I&R Counselor and is entitled to seek other means to correct the personal problem and the unacceptable performance or conduct. However, if the employee is unable or unwilling to respond adequately to the recommended treatment or other actions and the unacceptable performance or conduct does not improve, corrective action may be initiated by management.

8. Forms Distribution. The forms shown in enclosures (3) and (5) are available in the Personal Affairs Branch, Personnel and Administrative Division.

W. J. MCGRATH

Chief of Staff

DISTRIBUTION: C

#### DEFINITIONS

These definitions are only for the administration of the Civilian Employee Assistance Program. They are not intended to modify or influence definitions applicable to statutory provisions and regulations which relate to disability benefits or criminal or civil responsibility for an individual's acts or omissions.

1. Alcohol Abuse. Use of alcohol which results in unacceptable social behavior or impairs the individual's performance of duty or job-related conduct, physical or mental health, financial responsibility or interpersonal relationships.

2. Alcoholism. A chronic and progressive disease characterized by physical and/or psychological dependence on alcohol. It does not necessarily result in performance or conduct problems, especially in the early stages.

3. Civilian Employee Assistance Program (CEAP). A management program offering assistance to employees who have problems involving alcoholism, drug abuse or other serious personal problems which result in impairment of job performance or job-related conduct.

4. CEAP Administrator. The individual designated by the activity head to ensure that the provisions of CPI 792 are met.

5. Information and Referral (I&R) Counselor. The individual responsible for conducting the initial interview with an employee, explaining the provisions of this program, determining the nature of the personal problem, and referring the

employee to a source of assistance.

6. Drug Abuse. Use of a drug in a manner or to a degree which interferes with the individuals health, interpersonal relations, social behavior, economic functioning, or job performance.

7. Rehabilitation. A process often necessary for the successful recovery from alcoholism, drug addiction or other dependencies. Rehabilitation occurs following treatment and normally does not require medical supervision. Ordinarily, rehabilitation involves individual or group counseling or participation in self-help organizations such as Alcoholics Anonymous or Overeaters Anonymous.

8. Treatment. The initial step in the process of recovery from alcoholism, drug abuse or other dependencies. Treatment is conducted under medical supervision and serves to alleviate the conditions resulting from substance abuse. Treatment is a prelude to and should not be confused with rehabilitation.

ENCLOSURE (1)

#### GUIDELINES FOR DISCIPLINARY ACTIONS

The CEAP is not responsible for advising managers regarding performance, leave and discipline problems involving civilian employees; however, CEAP referral, leave, performance and discipline often go hand in hand. Proceures set forth in BO P12000.6 are applicable to these actions. Supervisors should consult the Employee Relations staff in regard to these matters.

ENCLOSURE (2)

#### PROCEDURES FOR OBTAINING COMPETENCE-FOR-DUTY EXAMINATIONS FOR CIVILIAN EMPLOYEES SUSPECTED OF BEING UNDER THE INFLUENCE OF INTOXICANTS

1. When a civilian employee is found drinking on duty and/or behaving in a manner that suggests he/she may be under the influence of intoxicants, the following procedures will be followed:

a. The supervisor or the supervisor's representative will telephone the Branch Clinic, Building 7200, extension 5986, and alert medical personnel to expect the arrival of an employee who may be under the influence of intoxicants. The supervisor will complete items 1-12 on Competence-for-Duty Examination, Form NAVMED 6120/1 (Rev 1-82), (see enclosure (5)), with particular



attention to item 7, "Reason for Referral."

b. The supervisor will then accompany the employee to the Branch Clinic, Building 7200. Upon arrival at the Clinic, the supervisor will present the Competence-for-Duty Examination form to be completed by the Medical Officer or the Physician Assistant to determine if the employee is under the influence of intoxicants.

c. The Medical officer or the Physician Assistant will conduct the employee's examination. If the employee is reluctant or refuses to undergo a physical examination, the Medical Officer or the Physician Assistant will at that time make a clinical evaluation of the employee's condition and advise the supervisor of the findings. For most Competence-for-Duty examinations, clinical observation alone is sufficient. The attending Medical Officer or the Physician Assistant will document the examination and/or evaluation on the above mentioned form. This documentation will include a statement that in the professional opinion of the Medical Officer or Physician Assistant the employee is or is not under the influence of intoxicants. If the employee is determined to be under the influence, the employee will be described in behavioral terms, e.g., staggering gait, flushed face, slurred speech, tremors, coordination problems, odor of alcohol on breath, etc. This documentation will be provided to the employee's supervisor who will determine if the employee should or should not be sent home.

2. Action taken after the medical examination and/or evaluation will depend on the assessment of the employee's condition.

a. If in the Medical Officer's opinion the employee is under the influence of intoxicants, but not in need of any further medical attention, he/she will be released to the authority of the supervisor.

The supervisor will place the employee in a sick leave status and the employee will be sent home for failing to be "ready, willing, and able to work." The supervisor will attempt to arrange for a member of the employee's family to provide transportation or arrange for transportation by commercial taxi at the employee's expense. If the employee attempts to leave the Base driving a motor vehicle, the Provost Marshalls office will be informed immediately.

b. If the employee is found to need immediate medical care, he/she will be referred to the appropriate community resource as recommended by the Medical Officer and placed on sick leave.

c. If the employee is not under the influence of intoxicants and is fit for duty, he/she will be returned to duty.

3. Subsequent to the above action and a finding that an employee was under the influence of intoxicants while on duty or a supervisory determination that he/she was drinking alcohol or using other intoxicants on duty, that employee's supervisor will:

a. Try to determine whether the incident was an isolated one or part of a problematic pattern.

b. Discuss the current incident with the employee immediately upon his/her return to duty and seek the employee's evaluation of it. He/she will also advise the employee of the possible outcome, including disciplinary action, of the recent incident of intoxication on duty.

c. Regardless of the outcome of the conversation with the employee, the supervisor will offer the employee the assistance of a Referral Counselor by contacting the Civilian Employee Assistance Program Administrator at extension 5276 within 72 hours of the incident.

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